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CONFIRMATION NO. 6639

<b>SERIAL NUMBER</b> 10/526,089	<b>FILING OR 371(c) DATE</b> 02/23/2005 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> PU0265
<b>APPLICANTS</b> Cecilia Kepka, Exercisg, SWEDEN; Jenny Rhodin, Sofiaparken, SWEDEN; Folke Tjerneld, Stenhuvudsgatan, SWEDEN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/SE03/01016 06/17/2003 } OK RAM				
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0202552-6 08/27/2002				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20
Verified and Acknowledged Examiner's Signature <u>1/2/05</u> Initials				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22840				
<b>TITLE</b> Recovery of plasmids in an aqueous two-phase system				
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	